

No. C 143677

Due no later than April 30, 2008

Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:
SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

KNIEFEL INSURANCE SERVICES, INC.
2004 NORCREST DR
BOISE, ID 83705

BRUCE KNIEFEL
2004 NORCREST DR
BOISE, ID 83705

NO FILING FEE IF
RECEIVED BY DUE DATE

3. New Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Pres./owner	Bruce Kniefel	2621 E. Stewart Dr.	Boise	ID.	83712
V.P.	Connie Kniefel	" "	" "	" "	" "

5. Organized Under the Laws of:
IDAHO
C 143677

6.

Signature

Date

Name (Typed or Printed)

Title

Issued 02/01/2008

Do Not Tape or Staple

200804003107